Case 15-24542 Doc 26 Filed 01/04/16 Page 1 of 19

Fill	II in this information to identify your case:			
	ebtor 1 Traycee Cecilia Clemons			
Doo	First Name Middle Name Last Name			
	bouse if, filing) First Name Middle Name Last Name			
Unit	nited States Bankruptcy Court for the: DISTRICT OF MARYLAND			
Cas	ase number 15-24542			
	known)		_	ck if this is an Inded filing
Su Be a	fficial Form 106Sum ummary of Your Assets and Liabilities and Certain Statistic as complete and accurate as possible. If two married people are filing together, both a	re equally responsible f		
your	ormation. Fill out all of your schedules first; then complete the information on this form ur original forms, you must fill out a new <i>Summary</i> and check the box at the top of this		iea scne	dules after you file
ran	art 1: Summarize Your Assets		Your	assets
				of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		\$	217,985.00
	1b. Copy line 62, Total personal property, from Schedule A/B			13,455.00
	1c. Copy line 63, Total of all property on Schedule A/B			231,440.00
Part	art 2: Summarize Your Liabilities		· <u>—</u>	
			Your	liabilities
				int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of	of Part 1 of <i>Schedule D</i>	\$	293,500.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule	E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedu	ule E/F	\$	7,786.68
		Your total liabilities	¢	301,286.68
		Tour total habilities	Φ	301,200.00
Part	art 3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	2,500.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	3,691.33
Part	art 4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this	s form to the court with yo	our other	schedules.
7.	■ Yes What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28		a person	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this pa	art of the form. Check thi	s <i>box</i> and	submit this form to

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Official Form 106Sum

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Debtor 1 Traycee Cecilia Clemons

Case number (if known) 15-24542

the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,598.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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	formation to ident	ify your case and tl	nis filing:		
Debtor 1		ecilia Clemons	-		
Jebioi i	First Name		Name Last Name		
Debtor 2					
Spouse, if filing)	First Name	Middle	Name Last Name		
Jnited States	s Bankruptcy Court f	for the: DISTRICT	OF MARYLAND		
Case number	15-24542				Check if this is a amended filing
>4: -: - I F	T 400A	/D			
	Form 106A/				
cnear	ule A/B: F	roperty			12/15
☐ No. Go to Yes. Whe	Part 2.				
1.1	Oth Ava		What is the property? Check all that apply.		
	Oth Ave ress, if available, or other	description	Single-family home		claims or exemptions. Put the
			Duplex or multi-unit building		claims on <i>Schedule D:</i> laims Secured by Property.
			☐ Condominium or cooperative		
			☐ Manufactured or mobile home		
	l Heights MD	20743-0000	☐ Land	Current value of the entire property?	Current value of the portion you own?
Capitol			□···-		
Capitol	State	zIP Code	☐ Investment property	\$217,985.00	·
	State	e ZIP Code	☐ Investment property☐ Timeshare	\$217,985.00	·
	State	e ZIP Code	<u> </u>		\$217,985.0
	State	e ZIP Code	Timeshare	Describe the nature o	\$217,985.0 f your ownership interest enancy by the entireties, or
	State	e ZIP Code	☐ Timeshare ☐ Other Who has an interest in the property? Check	Describe the nature o	\$217,985.0 f your ownership interest enancy by the entireties, or
City	State	e ZIP Code	☐ Timeshare ☐ Other Who has an interest in the property? Check one.	Describe the nature o (such as fee simple, to a life estate), if known	\$217,985.0 f your ownership interest enancy by the entireties, or
City		e ZIP Code	☐ Timeshare ☐ Other Who has an interest in the property? Check one. ☐ Debtor 1 only	Describe the nature o (such as fee simple, to a life estate), if known Fee simple	f your ownership interest enancy by the entireties, or
City		e ZIP Code	☐ Timeshare ☐ Other Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only	Describe the nature o (such as fee simple, to a life estate), if known Fee simple	\$217,985.0 f your ownership interest enancy by the entireties, or
City		e ZIP Code	☐ Timeshare ☐ Other Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Describe the nature or (such as fee simple, to a life estate), if known Fee simple Check if this is co (see instructions)	f your ownership interest enancy by the entireties, or
City		e ZIP Code	☐ Timeshare ☐ Other Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this item	Describe the nature or (such as fee simple, to a life estate), if known Fee simple Check if this is co (see instructions)	f your ownership interest enancy by the entireties, on
City		e ZIP Code	☐ Timeshare ☐ Other Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this item	Describe the nature or (such as fee simple, to a life estate), if known Fee simple Check if this is co (see instructions)	f your ownership interest enancy by the entireties, on
Prince County	Georges		☐ Timeshare ☐ Other Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this item	Describe the nature or (such as fee simple, to a life estate), if known Fee simple Check if this is con (see instructions), such as local	\$217,985.0 f your ownership interest enancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debto	or 1 <u>T</u>	raycee Cecilia Clemons		Case number (if known)	15-24542
Ca	rs, vans,	, trucks, tractors, sport utility ve	ehicles, motorcycles		
_	NI -				
.	Yes				
		Maraadaa Dana		Do not deduct sec	cured claims or exemptions. Put
3.1	Make:	Mercedes-Benz	Who has an interest in the property? Check one.	the amount of any	secured claims on Schedule D:
	Model:	E230	Debtor 1 only	Creditors Who Ha	ave Claims Secured by Property.
	Year:	1998	Debtor 2 only	Current value of	
		nate mileage: 140000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:	At least one of the debtors and another		
			Check if this is community property (see instructions)	\$1,57	5.00 \$1,575.0
3.2	Make:	Acura	Who has an interest in the property? Check one.	the amount of any	cured claims or exemptions. Put
	Model:	TL	Debtor 1 only	Creditors Who Ha	ave Claims Secured by Property.
	Year:	2006 nate mileage: 160000	Debtor 2 only	Current value of	
			Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation:	At least one of the debtors and another		
	Daugii	iter S car	Check if this is community property (see instructions)	\$4,150	0.00 \$4,150.0
3.3	Make:	Mercedes	Who has an interest in the property? Check one.		cured claims or exemptions. Put
	Model:	S430	■ Debtor 1 only		v secured claims on Schedule D: ave Claims Secured by Property.
	Year:	2006	Debtor 2 only	0	the Occurrent control of the
	Approxir	mate mileage: 137000	Debtor 1 and Debtor 2 only	Current value of entire property?	the Current value of the portion you own?
	Other inf	formation:	☐ At least one of the debtors and another		
	Not ru	nning.		47	
			☐ Check if this is community property	\$5,000	0.00 \$5,000.0
			(see instructions)		
	amples: B		nd other recreational vehicles, other vehicles atercraft, fishing vessels, snowmobiles, motorcy		
		• •	rn for all of your entries from Part 2, includin that number here	• •	\$10,725.00
art 3	Descri	be Your Personal and Household Ite	ms		
		, , ,	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E>	<i>(amples:</i> No	goods and furnishings Major appliances, furniture, linens	s, china, kitchenware		
	Yes. De	escribe			

Official Form 106A/B Schedule A/B: Property page 2

Traycee Cecilia Clemons Case number (if known) 15-24542 Debtor 1

7.

8.

9.

Household Goods & Furnishings: Beds, Dressers, Mirrors, Night stands, Sofa, Chairs, Loveseat, Coffee table, Entertainment Center, End tables, Lamps, Televisions, DVD Players, DVD's, Stereo, CD's, Stove, Microwave, Kitchen Table, Chairs, Set of Dishes, Set of Pots and Pans, Set of Silver ware, Mixer, Blender, Toaster, Telephones, Vacuum Cleaner.

\$2,500.00

7.	Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games	collections; electronic devices
	■ No	
	Yes. Describe	
8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin other collections, memorabilia, collectibles	n, or baseball card collections;
	■ No	
	Yes. Describe	
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments	and kayaks; carpentry tools;
	■ No	
	Yes. Describe	
10	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	■ No	
	☐ Yes. Describe	
11	. Clothes <i>Examples:</i> Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	■ No	
	☐ Yes. Describe	
12	 Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, □ No 	gold, silver
	Yes. Describe	
	Jewelry: Costume Jewelry	\$20.00
13	S. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe	
14	Any other personal and household items you did not already list, including any health aids you did not list No	
	☐ Yes. Give specific information	
1	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$2,520.00
	art 4: Describe Your Financial Assets	
D	o you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3

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Debtor	1 Traycee	Cecilia Clemons		Case number (if known) _15-2	4542
16. Cas		you have in your wallet, in yo	ur home, in a safe deposit box, an	nd on hand when you file your petition	
■ N	lo				
☐ Y	es				
17. De p	oosits of mone	ә у			
Ex	•		I accounts; certificates of deposit; counts with the same institution, list	shares in credit unions, brokerage house teach.	s, and other similar
□N	lo				
■ Y	'es		Institution name:		
		17.1.	TD Bank		\$200.00
		inds, or publicly traded stoc funds, investment accounts wi	ks th brokerage firms, money market	accounts	
■ N	lo				
□Y	es	Institution or is:	suer name:		
	n-publicly trad d joint venture		corporated and unincorporated	businesses, including an interest in ar	ո LLC, partnership,
■ N	_				
ΠY	es. Give speci	ific information about them			
		Name of entity:		% of ownership:	
Ne	gotiable instrur	ments include personal checks	negotiable and non-negotiable is, cashiers' checks, promissory no ot transfer to someone by signing	otes, and money orders.	
■ N	lo				
ПΥ	es. Give specif	fic information about them Issuer name:			
		nsion accounts sts in IRA, ERISA, Keogh, 401	(k), 403(b), thrift savings accounts	s, or other pension or profit-sharing plans	
□N	lo				
■ Y	es. List each a	ccount separately.			
		Type of account:	Institution name:		640.00
			Retirement Accour	nt: 401K	\$10.00
		s and prepayments	de so that you may continue service	ce or use from a company	
				water), telecommunications companies, o	or others
■ N	lo				
ΠY	es		Institution name or ind	lividual:	
23 Δn r	nuities (A conti	ract for a periodic payment of	money to you, either for life or for	a number of years)	
23. A III	,	raction a periodic payment of	money to you, either for life or for a	a number of years)	
	es	Issuer name and description	on.		
_		·			
26 L	J.S.C. §§ 530(b	ucation IRA, in an account in b)(1), 529A(b), and 529(b)(1).	า a qualified ABLE program, or เ	under a qualified state tuition program	
■ N □ Y	io 'es	Institution name and descr	ription. Separately file the records	of any interests.11 U.S.C. § 521(c):	
_		or future interests in proper	rty (other than anything listed in	line 1), and rights or powers exercisal	ble for your benefit
■ N	lo	-			
ПΥ	es. Give speci	ific information about them			
			ts, and other intellectual propert roceeds from royalties and licensing	-	
■ N	lo				

Official Form 106A/B Schedule A/B: Property page 4

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De	ebtor 1	Traycee Cecilia Clemons Case nu	ımber (if known)	15-24542
	☐ Yes.	Give specific information about them		
27.	Examp ■ No	ses, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, pro Give specific information about them	ofessional licens	es
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	funds owed to you		
	■ No			
	☐ Yes.	Give specific information about them, including whether you already filed the returns and the t	ax years	
29.	Examp ■ No	r support oles: Past due or lump sum alimony, spousal support, child support, maintenance, divorce sett Give specific information	lement, property	settlement
30.	Examp	amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, benefits; unpaid loans you made to someone else	workers' compe	nsation, Social Security
	☐ Yes.	Give specific information		
31.		sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, o	r renter's insurar	nce
	■ No			
	☐ Yes.	Name the insurance company of each policy and list its value. Company name: Beneficiary:		Surrender or refund value:
32.	If you a	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are current one has died.	ly entitled to rec	eive property because
		Give specific information		
33.	Examp ■ No	s against third parties, whether or not you have filed a lawsuit or made a demand for parties: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	yment	
34	_	contingent and unliquidated claims of every nature, including counterclaims of the debt	or and rights to	set off claims
0-1.	■ No	ociningon and aniquidated claims of oreity materies, morating counterclaims of the assi	ior and rights to	o dot dir diamino
	☐ Yes.	Describe each claim		
35.		nancial assets you did not already list		
	■ No □ Yes.	Give specific information		
36		the dollar value of all of your entries from Part 4, including any entries for pages you havart 4. Write that number here	ve attached	\$210.00
D-	15 5	coribe Any Business Balated Branarty Voy Own or Have an Interest In List any real actate in Bart 1		

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

 $37.\,$ Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

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Deb	otor 1 Traycee Cecilia Clemo	ns		Case number (if known)	15-24542
	Yes. Go to line 38.				
Dort	Deceribe Any Form and Commer	nial Fishing Polated Bronarty Voy O	uun or House on Interest	. In	
Part	If you own or have an interest in farm	cial Fishing-Related Property You Onland, list it in Part 1.	wn or have an interest	: In.	
46. I	Do you own or have any legal or e	equitable interest in any farm-	or commercial fishi	ng-related property?	
	No. Go to Part 7.				
	Yes. Go to line 47.				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
Part	7: Describe All Property You Own or	Have an Interest in That You Did No	ot List Above		
	Do you have other property of any Examples: Season tickets, country				
	No				
	☐ Yes. Give specific information				
54.	Add the dollar value of all of you	ır entries from Part 7. Write tha	at number here		\$0.00
Part	8: List the Totals of Each Part of this	Form			
55.	Part 1: Total real estate, line 2				\$217,985.00
	Part 2: Total vehicles, line 5		\$10,725.00		
	Part 3: Total personal and house	_	\$2,520.00		
	Part 4: Total financial assets, lin	_	\$210.00		
59.	Part 5: Total business-related pr	operty, line 45	\$0.00		
60	Part 6: Total farm- and fishing-re	elated property line 52	\$0.00		
	Part 7: Total other property not I	_	\$0.00		
	Total personal property. Add line	· -	\$13,455.00	Copy personal property t	otal \$13,455.0
63	Total of all property on Schedule	e A/B Add line 55 + line 62			\$231,440,00

Official Form 106A/B Schedule A/B: Property

page 6

Fill in this infor				
Debtor 1	Traycee Cecilia C	lemons		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND		
Case number	15-24542			
(if known)				Check if this is amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.					
■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
	, , ,	Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
	1998 Mercedes-Benz E230 140000 miles	\$1,575.00		\$1,575.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)				
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	1.00.3 11 00-1(0)(0)				
	2006 Acura TL 160000 miles Daughter's car	\$4,150.00		\$4,150.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)				
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit					
	2006 Acura TL 160000 miles Daughter's car	\$4,150.00		\$0.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)				
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit					
	Household Goods & Furnishings: Beds, Dressers, Mirrors, Night	\$2,500.00		\$1,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)				
	stands, Sofa, Chairs, Loveseat, Coffee table, Entertainment Center, End tables, Lamps, Televisions, DVD Players, DVD's, Stereo, CD's, Stove, Microwave, Kitchen Table, Chairs, Set of Dishes, Se Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					

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Debtor	Traycee Cecilia Clemons			Case number (if known)	15-24542	
	Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own			ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	ousehold Goods & Furnishings: eds, Dressers, Mirrors, Night	\$2,500.00		\$1,500.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
sta Co En Pla Mi Se	ands, Sofa, Chairs, Loveseat, offee table, Entertainment Center, and tables, Lamps, Televisions, DVD ayers, DVD's, Stereo, CD's, Stove, crowave, Kitchen Table, Chairs, of of Dishes, Se from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	welry: Costume Jewelry e from Schedule A/B: 12.1	\$20.00		\$20.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
Liii	is non-governor.			100% of fair market value, up to any applicable statutory limit	1.00.3 1.00 ((2)(0)	
	D Bank e from Schedule A/B: 17.1	\$200.00	0.00 \$200.0		Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
				100% of fair market value, up to any applicable statutory limit		
	etirement Account: 401K	\$10.00		\$10.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
				100% of fair market value, up to any applicable statutory limit		
	e you claiming a homestead exemption of ubject to adjustment on 4/01/16 and every 3 No Yes. Did you acquire the property covered No Yes	3 years after that for ca	ases f	,	,	

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Debtor 1 Traycee Cecilia Clemons First Name Wide Norre Wide Norre Wide Norre Last Name Unless States Bankruptcy Court for the: DISTRICT OF MARYLAND Case number 15-24542 (it twown) District Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filling logather, both are squally responsible for supplying correct information. If more space is encoded, copy the Address Pape, If it is on, inner for the others, and stach it to this form. On the top of any additional papes, write your name and case number (if inner the control of the paper) 1. Do any oreeffor's have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 1. Do any creditor's have claims and submit this form to the court with your other schedules. You have nothing else to report on this form. 1. Ves. Fill in all of the information below. 2. Use all secured claims. It is organized to the creditor separately for many property. 2. List all secured claims. 2. List all secured claims. 2. List all secured claims. 2. Describe the property that secures the claim: 2. To Capital One Bank Coulture Name Describe the property that secures the claim: 2. To Capital One Bank Coulture Name Describe the property that secures the claim: 2. To Capital One Bank Coulture Name Describe the property that secures the claim: 2. To Capital One Bank Coulture Name Describe the property that secures the claim: 2. To Capital One Bank Coulture Name Describe the property that secures the claim: 2. To Capital One Bank Coulture Name Describe the property that secures the claim: 2. To Capital One Bank Coulture Name Describe the desters and archier Debtor 1 and Debtor 2 only	Fill in this information to identify yo	ur case:				
Debtor 2 Syove it, first pare Middle Name Last Name						
Debtor 2 Caper Intervent Middle Name Last Na			ant Nama			
Check if this is an amended filing		Middle Name	ast Name			
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At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset)	Debtor 2 only	car loari)				
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Check if this claim relates to a Community debt Check if this claim relates to a Community debt Community debt			nic's lien)			
community debt	<u>=</u>					
Date debt was incurred Last 4 digits of account number		☐ Other (including a right to offset)				
	Date debt was incurred	Last 4 digits of account number				

Schedule D: Creditors Who Have Claims Secured by Property

Official Form 106D

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Deptor 1	Traycee Cec	ilia Ciemons		Case number (if know)	15-24542
	First Name	Middle Name	Last Name		
Add the	dollar value of yo	ur entries in Column A on th	nis page. Write that number he	ere: \$293,500	0.00
	the last page of y at number here:	our form, add the dollar valu	ue totals from all pages.	\$293,500	0.00
Part 2:	List Others to E	Be Notified for a Debt Th	at You Already Listed		
to collect creditor fo	from you for a del	ot you owe to someone else s that you listed in Part 1, lis	, list the creditor in Part 1, and	I then list the collection agency her	r example, if a collection agency is trying re. Similarly, if you have more than one ons to be notified for any debts in Part 1,
Na	ame Address				
-N	ONE-		On w	hich line in Part 1 did you	enter the creditor?
			Last	4 digits of account number	· ———

Case 15-24542 Doc 26 Filed 01/04/16 Page 13 of 19

Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Traycee Cecilia Clemons							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND						
Case number	15-24542							
(if known)	10 2 10 12							

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Name		Person or	company with	whom you have the	e contract or lease Code	State what the contract or lease is for
Number Street	2.1					
City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Number Street		Name				
Number Street State ZIP Code		Number	Street			
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2.3 Name Number Street State ZIP Code 2.4 Name Number Street State ZIP Code 2.5 Name Name		City		State	7IP Code	_
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City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street		Name				_
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2.5 Name Number Street		Number	Street			_
Number Street		City		State	ZIP Code	_
Number Street	2.5					
		Name				
City State ZIP Code		Number	Street			_
		City		State	ZIP Code	_

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	Case	13-24342 DUC 2	.0 1 11 C u 0 1/0 4 /	10 Tage 14 OF	19
Fill in this	information to identify your	case:			
Debtor 1	Traycee Cecilia C	Clemons			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF MARYLA	AND		
Case numb	er 15-24542				
(if known)					☐ Check if this is an amended filing
Official	Form 106H				
		obtoro			
<u>Scnea</u>	ule H: Your Cod	eptors			12/15
our name	nd number the entries in the and case number (if known ou have any codebtors? (If). Answer every question	ı. -		o of any Additional Pages, write
■ No □ Yes					
					
	in the last 8 years, have you a, California, Idaho, Louisiana				states and territories include
■ No. 0	Go to line 3.				
☐ Yes.	Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line Form 1	2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Officia Schedule E/F, or Schedule G to
-	Column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	
	lame			Schedule E/F, lin	
				☐ Schedule G, line	·
	lumber Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	lame			Schedule E/F, line	
				☐ Schedule G, line	
N	lumber Street				
C	City	State	ZIP Code		

Fill	in this information to identify your c	ase:								
		ilia Clemons								
	otor 2				_					
Unit	ted States Bankruptcy Court for the	: DISTRICT OF MARYI	LAND		_					
	se number 15-24542					Check if this is	s:			
(If kn	own)					☐ An amend		·		
						☐ A supplem 13 income		_	g postpetition Illowing date	
<u>O</u> 1	fficial Form 106l					MM / DD/	YYYY	,		
So	chedule I: Your Inc	ome								12/15
sup _l	s complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not fill r spouse is not filing w	ng jointly, and your sp ith you, do not include	oouse e infor	is livino mation	g with you, inc about your sp	clude oouse	inforn . If mo	nation abou ore space is	it your needed,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or n	on-fil	ing spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Emp	☐ Employed			
	attach a separate page with information about additional employers.	Employment status	☐ Not employed			☐ Not e	☐ Not employed			
		Occupation	Sales Representa	tive						
	Include part-time, seasonal, or self-employed work.	Employer's name	ADT Security Ser	vice, I	nc					
	Occupation may include student or homemaker, if it applies.	Employer's address	P. O. Box 631877 Irving, TX 75063							
		How long employed the	here?							
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for	any line	e, write \$0 in th	e spa	ce. Inc	clude your no	on-filing
	u or your non-filing spouse have mo		ombine the information	for all	employe	ers for that pers	son or	the li	nes below. It	f you need
					Fo	or Debtor 1			otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	. \$_		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$		N/A	<u>.</u>
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	;	\$	N/A	

Debt	or 1	Traycee Cecilia Clemons	_	Case	e number (if known)	15-245	42	
				Fo	r Debtor 1		ebtor 2 or ling spouse	
	Cop	by line 4 here	4.	\$	0.00	\$	N/A	
5.	Lie	t all payroll deductions:						
J.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5a. 5b.	\$-	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.⊦	- \$_	0.00	+ \$	N/A	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	2,500.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 8c.	\$	0.00	\$	N/A	
	8d.		8d.	\$-	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	<u> </u>	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	2,500.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,500.00 + \$		N/A = \$	2,500.00
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	r depei				hedule J. 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rete that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$	2,500.00
							Combin	ed income
13.	Do	you expect an increase or decrease within the year after you file this form	1?				monuny	HICOHIE
		No.						
		Yes. Explain:						

Official Form 106I Schedule I: Your Income page 2

FIII	in this informa	tion to identify yo	our case:							
Deb	otor 1	Traycee Cec	ilia Clem	ons		Ch	eck if this is	.:		
							An amen	·		
l	otor 2 ouse, if filing)								wing postpetition chapter the following date:	
(0)	ouoo,g,									
Unit	ed States Bankri	uptcy Court for the:	DISTRI	CT OF MARYLAND			MM / DD	/ YYYY		
Cas	e number 15	-24542								
(If k	nown)									
O	fficial Fo	rm 106J								
S	chedule	J: Your I	Exper	ises					12/	15
Be info nur	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta y questio	. If two married people and the contract in the contract is the contract in th						
Par 1.	t 1: Descr Is this a join	ibe Your House	hold							
١.	-									
	■ No. Go to		in a separ	ate household?						
	□ No									
	 -		st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of D	ebtor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list Do and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Depen age	ident's	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							☐ Yes	
									☐ No	
									☐ Yes	
									☐ No	
									☐ Yes	
									☐ No	
•	_								☐ Yes	
3.	expenses of	enses include f people other to d your depende	nan <u> </u>	No Yes						
Est exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp						
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i> \			,	Your exp	enses	
4.		or home owners		uses for your residence. I	nclude first mortgage	e 4.	\$		1,000.00	
		led in line 4:	-							
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's	s, or renter	's insurance		4a. 4b.	·		0.00	
		•		upkeep expenses		4c.			0.00	
		owner's associat				4d.			0.00	
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

1542	er (if known) 15-24542	e numbe	Case		Traycee Ce	otor 1
					lities:	4:1:4
445.00	\$	6a. §				6a.
53.33	·	6b. 9			•	6b.
180.00	·	6c. 9		te, and cable services		6c.
	·			le, and cable services		6d.
0.00	·	6d. \$				
250.00	·	7. \$			od and houseke	
0.00	·	8. \$			ildcare and child	
0.00	\$	9. \$			othing, laundry, a	
30.00	\$	10. \$			rsonal care prod	Pers
980.00	\$	11. \$			dical and dental	Medi
200.00	Φ	40 (ous or train fare.	insportation. Inc	
	·	12. \$			not include car p	
50.00	•	13. \$		ers, magazines, and books		
70.00	\$	14. \$		nations	aritable contribu	Char
					urance.	
				pay or included in lines 4 or 20.		
0.00	·	15a. \$			a. Life insurance	
0.00	\$	15b. §			o. Health insurar	15b.
115.00	\$	15c. \$			c. Vehicle insura	15c.
0.00	\$	15d. §			d. Other insuran	15d.
				our pay or included in lines 4 or 20.	kes. Do not includ	Taxe
0.00	\$	16. \$		ou. pay or moradou in imico i or zor		Spec
					tallment or lease	
318.00	\$	17a. \$			a. Car payments	
0.00	\$	17b. §			o. Car payments	
0.00	\$ \$	17c. §			c. Other. Specify	
0.00	·	17d. §			d. Other. Specify	
0.00		174.		and support that you did not report as		
0.00	\$	18. \$		le I, Your Income (Official Form 106I).		
0.00	\$	9	,-	ers who do not live with you.		
		19.		•		Spec
	ur Income.		hedule	I in lines 4 or 5 of this form or on Sch	,	
0.00		20a. §			a. Mortgages on	
0.00		20b. §			o. Real estate ta	
0.00	·	20c. §		irance	c. Property, hom	
		20d. §			d. Maintenance,	
0.00	·					
0.00	·	20e. \$		ilum dues	e. Homeowner's	
0.00	+\$	21			ner: Specify:	Othe
					culate your mor	Calc
3,691.33	\$ 3,6				a. Add lines 4 thro	
3,031.33	\$)	tor 2) if any from Official Form 106 L2		
			<u>-</u>	tor 2), if any, from Official Form 106J-2		
3,691.33	\$3,6			r monthly expenses.	c. Add line 22a ar	22c.
		L			Iculate your mor	Calc
2,500.00	\$	23a. §		ncome) from Schedule I.		
3,691.33	·	23b			o. Copy mile 12 (
3,091.33	Ψ	200		220 above.	5. Copy your file	۷۵۵.
				your monthly income.	s. Subtract your	23c
-1,191.33	\$ -1	23c. \$		Total monthly income.	The result is y	200.
		<u> </u>			1110 1000it 10 y	
				your expenses within the year after y		
rease because of a				car loan within the year or do you expect your	example, do you ex	For ex
					dification to the term	modifi
					No.	■ No
					Yes Fx	$\square \vee $
ea	nent to increase or decrea	age payr	r mortga	car loan within the year or do you expect your	No.	modifi

Fill in this info				
Debtor 1	Traycee Cecilia C			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF MARYLAND		
Case number	15-24542			
(if known)				☐ Check if this is an
				amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NO	T an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have reach that they are true and correct. X /s/ Traycee Cecilia Clemons	d the summary and schedules filed with this declaration and X
Traycee Cecilia Clemons Signature of Debtor 1	Signature of Debtor 2
Date January 4, 2016	Date

Official Form 106Dec